DEPARTMENT OF HEALTH AND FAMILY SERVICES Division of Disability and Elder Services Printed 02/24/2006

Provider Inspection Summary

For the period 01/01/2003 to 12/31/2005 Residential Care Apartment Complex CERTIFIED STATE OF WISCONSIN Bureau of Quality Assurance P.O. Box 2969 Madison WI 53701-2969

Facility Information

Facility Name: HIGHLAND HOUSE (0010320)

Address: 161 GOEHL RD, WATERLOO, WI 53594

License Status: REGULAR

Licensed/Certified/Registered 07/01/2003

Regional Office: SOUTHERN REGION (MADISON), (608) 243-2370

Survey History

Survey ID: 0093402 End Date: 10/04/2004 Type: STANDARD Purpose: SURVEY

Results: NO STATEMENT OF DEFICIENCY ISSUED

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